

## **AMENDMENTS TO THE CLAIMS:**

This listing of claims will replace all prior versions and listings of claims in the application:

1.-58. (Canceled)

59. (Previously Presented) The method of claim 83, wherein positioning the device includes extending at least a portion of at least one elongate member within a chamber of the heart and anchoring an end of the at least one elongate member to one of a wall surrounding the heart chamber and a papillary muscle in the chamber.

60. (Previously Presented) The method of claim 59, wherein positioning the device further includes anchoring another end of the elongate member proximate the annulus of the valve.

61. (Previously Presented) The method of claim 59, wherein the at least one elongate member includes a tension member.

62. (Previously Presented) The method of claim 59, wherein the at least one elongate member includes a plurality of elongate members.

63. (Canceled)

64. (Previously Presented) The method of claim 83, wherein the heart structure includes a wall of a heart chamber.

65. (Canceled)

66. (Previously Presented) The method of claim 83, wherein altering the geometry of the heart structure includes altering at least one of a transverse radial dimension and vertical dimension of a heart chamber during at least a portion of the cardiac cycle.

67. (Previously Presented) The method of claim 66, wherein altering at least one of the transverse radial dimension and vertical dimension includes reducing at least one of the transverse radial dimension and vertical dimension.

68. (Previously Presented) The method of claim 83, wherein positioning the device includes positioning the device so as to alter a position of at least one papillary muscle associated with the valve.

69.-82. (Canceled)

83. (Previously Presented) A method of treating an in situ mitral valve, the method comprising:

positioning a passive device with respect to a heart such that, throughout the cardiac cycle, a portion of the device contacts and passively alters a geometry of heart structure other than leaflets, chordae, papillary muscles, and an annulus associated with the in situ mitral valve, wherein the passive device draws together leaflets of the in situ valve to promote closure of the in situ valve.

84. (Previously Presented) The method of claim 68, wherein altering the position of the at least one papillary muscle associated with the valve includes drawing the at least one papillary muscle toward the valve.

85. (New) A method for performing a procedure on a mitral valve of a heart, the method comprising:

inserting at least one implant into a left ventricle of the heart;

positioning the at least one implant with respect to the mitral valve, wherein positioning the implant includes orienting the implant in the left ventricle substantially below the mitral valve; and

attaching the implant to tissue located near the mitral valve.

86. (New) A method as recited in claim 85 further including:

reducing an arc length of the implant, wherein reducing the arc length of the implant substantially reduces an arc length associated with the mitral valve.

87. (New) A method as recited in claim 85 further including:

adjusting an arc length of the implant.

88. (New) A method as recited in claim 85 wherein the tissue is fibrous tissue.

89. (New) A method for performing annuloplasty, the method comprising:

accessing a left ventricle of a heart to provide an implant to the left ventricle; and

coupling the implant to tissue near a mitral valve of the heart, wherein the implant is coupled to a ventricular side of the mitral valve.

90. (New) A method as recited in claim 89 further including:  
shaping the implant, wherein shaping the implant substantially reduces an arc length associated with the mitral valve.

91. (New) A method as recited in claim 90 wherein shaping the implant includes substantially reducing an arc length of the implant.